

ESTIMATE

[Company Name]
[Phone Number]
[Email Address]

Estimate #: [0000]
Date: [MM/DD/YYYY]
Valid Until: [MM/DD/YYYY]

CLIENT INFORMATION

[Client Name]
[Service Address]
[City, State, Zip]
[Phone Number]

SERVICE DETAILS

Service Type: [Standard/Deep/Move-out]
Frequency: [One-time/Weekly/Bi-weekly]
Square Footage: [Approx. Sq Ft]

Description of Services	Qty/Hrs	Rate	Total
[Service Description Line 1]	[0]	\$0.00	\$0.00
[Service Description Line 2]	[0]	\$0.00	\$0.00
[Add-on: Windows/Laundry/Fridge]	[0]	\$0.00	\$0.00

Subtotal: \$0.00
Tax: \$0.00
Total Estimate: \$0.00

NOTES & TERMS

1. This estimate is based on the initial walkthrough and current condition of the home.
2. Final price may vary if additional services are requested on-site.
3. Cancellation requires [24/48] hours notice to avoid a fee.